

Fill in this information to identify your case:

Debtor 1	First Name Keith	Middle Name M.	Last Name Scriven
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania			
Case number 22 - 11818 AMC			(If known)

Check if this is an amended filing

Official Form 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an *insider*. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

			Unsecured claim
1	<p>What is the nature of the claim? <u>personal loan</u> \$ <u>80,000.00</u></p> <p>Creditor's Name William Whalon</p> <p>Number Street 138 North 2nd Street</p> <p>City State ZIP Code Philadelphia, PA 19106</p> <p>Contact _____</p> <p>Contact phone _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply</p> <p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____</p>		
2	<p>What is the nature of the claim? <u>credit card</u> \$ <u>4,565.00</u></p> <p>Creditor's Name Capital One</p> <p>Number Street P.O. Box 30285</p> <p>City State ZIP Code Salt Lake City, UT 84130</p> <p>Contact _____</p> <p>Contact phone _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply</p> <p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____</p>		

Debtor 1 **Keith M. Scriven**Case number (if known) **22 - 11818 AMC****Unsecured claim**

3 Credit One Bank, N.A. <small>Creditor's Name</small> 6801 So. Cimarron Road <small>Number Street</small>	What is the nature of the claim? credit card <small>As of the date you file, the claim is:</small> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ 2,025.00
4 Philadelphia Gas Works <small>Creditor's Name</small> 800 W. Montgomery Avenue <small>Number Street</small>	What is the nature of the claim? gas services <small>As of the date you file, the claim is:</small> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ _____
5 PECO Energy Co. <small>Creditor's Name</small> 2301 Market Street <small>Number Street</small>	What is the nature of the claim? electrical services <small>As of the date you file, the claim is:</small> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ _____
6 OpenSky Capital Bank <small>Creditor's Name</small> P.O. Box 8130 <small>Number Street</small>	What is the nature of the claim? electrical services <small>As of the date you file, the claim is:</small> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ 55.00
7 Santander Consumer USA, Inc. <small>Creditor's Name</small> P.O. Box 961245 <small>Number Street</small>	What is the nature of the claim? auto contract balance <small>As of the date you file, the claim is:</small> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ 1.00

Debtor 1 **Keith M. Scriven**

Case number (if known) **22 - 11818 AMC**

Unsecured claim

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Creditor's Name

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street

City State ZIP Code

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact

Contact phone

9

Creditor's Name

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street

City State ZIP Code

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact

Contact phone

10

Creditor's Name

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street

City State ZIP Code

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact

Contact phone

11

Creditor's Name

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street

City State ZIP Code

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact

Contact phone

12

Creditor's Name

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street

City State ZIP Code

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact

Contact phone

Debtor 1 **Keith M. Scriven**

Case number (if known) **22 - 11818 AMC**

Unsecured claim

13

Creditor's Name _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street _____

Does the creditor have a lien on your property?

- No

Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

City State ZIP Code _____

Contact _____

Contact phone _____

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Creditor's Name _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street _____

Does the creditor have a lien on your property?

- No

Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

City State ZIP Code _____

Contact _____

Contact phone _____

15

Creditor's Name _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street _____

Does the creditor have a lien on your property?

- No

Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

City State ZIP Code _____

Contact _____

Contact phone _____

16

Creditor's Name _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street _____

Does the creditor have a lien on your property?

- No

Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

City State ZIP Code _____

Contact _____

Contact phone _____

17

Creditor's Name _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Number Street _____

Does the creditor have a lien on your property?

- No

Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

City State ZIP Code _____

Contact _____

Contact phone _____

Debtor 1 **Keith M. Scriven**

Case number (if known) 22 - 11818 AMC

Unsecured claim

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Creditor's Name _____

Number Street _____

City State ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

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Creditor's Name _____

Number Street _____

City State ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

20

Creditor's Name _____

Number Street _____

City State ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? _____ \$ _____

As of the date you file, the claim is: Check all that apply.

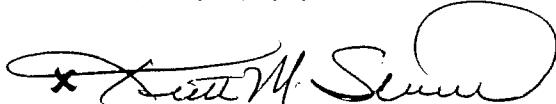
- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.



x

Signature of Debtor 1

Date 7/25/2022
MM / DD / YYYY

Signature of Debtor 2

Date _____
MM / DD / YYYY